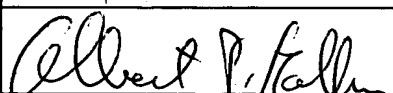


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<b>UTILITY PATENT APPLICATION TRANSMITTAL</b>  (Only for new nonprovisional applications under 37 CFR 1.53(b))		<b>Attorney Docket No.</b>		<b>05882.0181.NPUS01</b>	
		<b>First Inventor</b>		<b>Robert B. DuBridge</b>	
		<b>Title</b>	<b>Efficient Generation of Stable Expression Cell Lines Through the Use of Scorable Homeostatic Reporter Genes</b>		
		<b>Express Mail</b>		<b>EL615430189US</b>	

<b>APPLICATION ELEMENTS</b>		<b>Commissioner for Patents</b>	
<b>See MPEP Chapter 600 concerning utility patent application contents.</b>		<b>ADDRESS TO:</b> P. O. Box 1450 Alexandria, VA 22313-1450	
<p>1. <input checked="" type="checkbox"/> Fee Transmittal Form (PTO/SB/17) (Submit an original, and a duplicate for fee processing) 2. <input type="checkbox"/> Applicant claims small entity status. See 37 CFR 1.27. 3. <input checked="" type="checkbox"/> Specification [Total Pages <b>79</b>] (preferred arrangement set forth below) -Descriptive title of the invention -Cross reference to Related Applications -Statement Regarding Fed Sponsored R &amp; D -Reference to sequence listing, a table, or a computer program listing appendix -Background of the Invention -Brief Summary of the Invention <input checked="" type="checkbox"/> -Detailed Description <input checked="" type="checkbox"/> Claim(s) <input checked="" type="checkbox"/> -Abstract of the Disclosure 4. <input checked="" type="checkbox"/> Drawing(s) (35 U.S.C. 113) [Total Sheets <b>11</b>] 5. <input type="checkbox"/> Oath or Declaration [Total Pages <input type="checkbox"/> a. <input type="checkbox"/> Newly executed (original or copy) b. <input type="checkbox"/> Copy from a prior application (37 CFR 1.63 (d)) (for continuational divisional with Box 17 completed) i. <input type="checkbox"/> <b>DELETION OF INVENTOR(S)</b> Signed statement attached deleting inventor(s) named in the prior application, see 37 CFR 1.63(d)(2) and 1.33(b). 6. <input type="checkbox"/> Application Data Sheet. See 37 CFR 1.76</p>		<p>7. <input type="checkbox"/> CD-ROM or CD-R in duplicate, large table or Computer Program (Appendix) 8. <input type="checkbox"/> Nucleotide and/or Amino Acid Sequence Submission (if applicable, all necessary) a. <input type="checkbox"/> Computer Readable Form (CRF) b. Specification Sequence Listing on: i. <input type="checkbox"/> CD-ROM or CD-R (2 copies); or ii. <input type="checkbox"/> paper c. <input type="checkbox"/> Statements verifying identity of above copies</p>	
		<b>ACCOMPANYING APPLICATION PARTS</b>	
		<p>9. <input type="checkbox"/> Assignment papers (cover sheet &amp; document(s)) 10. <input type="checkbox"/> 37 CFR 3.73(b) Statement <input type="checkbox"/> Power of (when there is an assignee) Attorney 11. <input type="checkbox"/> English Translation Document (if applicable) 12. <input type="checkbox"/> Information disclosure <input type="checkbox"/> Copies of IDS Statement (IDS)/PTO-1449 Citations 13. <input type="checkbox"/> Preliminary Amendment 14. <input checked="" type="checkbox"/> Return Receipt Postcard (MPEP 503) (Should be specifically itemized) 15. <input type="checkbox"/> Certified Copy of Priority Document(s) (if foreign priority is claimed) 16. <input checked="" type="checkbox"/> Other: Checks for <b>\$750.00 and \$810.00</b></p>	
<p>17. If a CONTINUING APPLICATION, check appropriate box, and supply the requisite information below and in a preliminary amendment, or in an Application Data Sheet under 37 CFR 1.76: <input type="checkbox"/> Continuation <input type="checkbox"/> Divisional <input type="checkbox"/> Continuation-in-part (CIP) of prior application No.: / Prior application information: Examiner Group I Art Unit: <b>For CONTINUATION OR DIVISIONAL APPS only:</b> The entire disclosure of the prior application, from which an oath or declaration is supplied under Box 5b, is considered a part of the disclosure of the accompanying continuation or divisional application and is hereby incorporated by reference. The incorporation can only be relied upon when a portion has been inadvertently omitted from the submitted application parts.</p>			
<b>18. CORRESPONDENCE ADDRESS</b>			
<input checked="" type="checkbox"/> Customer Number or Bar Code Label <b>27194</b> or <input type="checkbox"/> Correspondence address below			
<b>Name</b>		<b>Howrey Simon Arnold &amp; White, LLP</b>	
<b>Address</b>		<b>301 Ravenswood Avenue</b>	
<b>City</b>		<b>Box 34</b>	
<b>Country</b>		<b>Menlo Park</b>	
<b>USA</b>		<b>State</b>	
<b>Telephone</b>		<b>CA</b>	
<b>(650) 463 8109</b>		<b>Zip Code</b>	
<b>Fax</b>		<b>94025</b>	
<b>(650) 463 8400</b>			

<b>NAME (Print/Type)</b>	<b>Albert P. Halluin</b>	<b>Registration No.</b>	<b>25,227</b>
<b>Signature</b>		<b>Date</b>	<b>09-30-03</b>

Burden Hour Statement: This form is estimated to take 0.2 hours to complete. Time will vary depending upon the needs of the individual case. Any comments on the amount of time you are required to complete this form should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, Washington, DC 20231. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Assistant Commissioner for Patents, Box Patent Application, Washington, DC 20231.

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**FEE TRANSMITTAL**  
**For FY 2003**

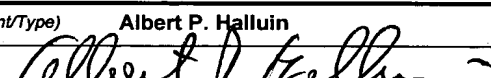
Patent fees are subject to annual revision.

**TOTAL AMOUNT OF PAYMENT (\$1,560.00****Complete if Known**

Application Number	Not yet Assigned
Filing Date	September 30, 2003
First Named Inventor	DuBridge, Robert B.
Examiner Name	Not yet Assigned
Group Art Unit	Not yet Assigned
Attorney Docket No.	05882.0181.NPUS01

METHOD OF PAYMENT					FEE CALCULATION (continued)																																																																																																																																																																																														
<b>1. <input checked="" type="checkbox"/> The Commissioner is hereby authorized to charge indicated fees and credit any overpayments to:</b> Deposit Acct. No. <b>08-3038</b> Deposit Account Name <b>Howrey Simon Arnold &amp; White, LLP</b> <input checked="" type="checkbox"/> Charge Any Additional Fee Required Under 37 CFR 1.16 and 1.17 <input type="checkbox"/> Applicant claims small entity status. See 37 CFR 1.27					<b>3. ADDITIONAL FEES</b> <table border="1" style="width:100%"> <thead> <tr> <th>Large Fee</th> <th>Entity Fee</th> <th>Small Fee</th> <th>Entity Fee</th> <th>Fee Description</th> <th>Fee Paid</th> </tr> </thead> <tbody> <tr><td>105</td><td>130</td><td>205</td><td>65</td><td>Surcharge - late filing fee or oath</td><td>_____</td></tr> <tr><td>127</td><td>50</td><td>227</td><td>25</td><td>Surcharge - late provisional filing fee or cover sheet</td><td>_____</td></tr> <tr><td>139</td><td>130</td><td>139</td><td>130</td><td>Non-English specification</td><td>_____</td></tr> <tr><td>147</td><td>2,520</td><td>147</td><td>2,520</td><td>For filing a request for ex parte reexamination</td><td>_____</td></tr> <tr><td>112</td><td>920*</td><td>112</td><td>920*</td><td>Requesting publication of SIR prior to Examiner action</td><td>_____</td></tr> <tr><td>113</td><td>1,840*</td><td>113</td><td>1,840*</td><td>Requesting publication of SIR after Examiner action</td><td>_____</td></tr> <tr><td>115</td><td>110</td><td>215</td><td>55</td><td>Extension for reply within first month</td><td>_____</td></tr> <tr><td>116</td><td>410</td><td>216</td><td>205</td><td>Extension for reply within second month</td><td>_____</td></tr> <tr><td>117</td><td>930</td><td>217</td><td>465</td><td>Extension for reply within third month</td><td>_____</td></tr> <tr><td>118</td><td>1,450</td><td>218</td><td>725</td><td>Extension for reply within fourth month</td><td>_____</td></tr> <tr><td>128</td><td>1,970</td><td>228</td><td>985</td><td>Extension for reply within fifth month</td><td>_____</td></tr> <tr><td>119</td><td>320</td><td>219</td><td>160</td><td>Notice of Appeal</td><td>_____</td></tr> <tr><td>120</td><td>320</td><td>220</td><td>160</td><td>Filing a brief in support of an appeal</td><td>_____</td></tr> <tr><td>121</td><td>280</td><td>221</td><td>140</td><td>Request for oral hearing</td><td>_____</td></tr> <tr><td>138</td><td>1,510</td><td>138</td><td>1,510</td><td>Petition to institute a public use proceeding</td><td>_____</td></tr> <tr><td>140</td><td>110</td><td>240</td><td>55</td><td>Petition to revive - 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late filing fee or oath	_____	127	50	227	25	Surcharge - late provisional filing fee or cover sheet	_____	139	130	139	130	Non-English specification	_____	147	2,520	147	2,520	For filing a request for ex parte reexamination	_____	112	920*	112	920*	Requesting publication of SIR prior to Examiner action	_____	113	1,840*	113	1,840*	Requesting publication of SIR after Examiner action	_____	115	110	215	55	Extension for reply within first month	_____	116	410	216	205	Extension for reply within second month	_____	117	930	217	465	Extension for reply within third month	_____	118	1,450	218	725	Extension for reply within fourth month	_____	128	1,970	228	985	Extension for reply within fifth month	_____	119	320	219	160	Notice of Appeal	_____	120	320	220	160	Filing a brief in support of an appeal	_____	121	280	221	140	Request for oral hearing	_____	138	1,510	138	1,510	Petition to institute a public use proceeding	_____	140	110	240	55	Petition to revive - unavoidable	_____	141	1,300	241	650	Petition to revive - unintentional	_____	142	1,300	242	650	Utility issue fee (or reissue)	_____	143	470	243	235	Design issue fee	_____	144	630	244	315	Plant issue fee	_____	122	130	122	130	Petitions to the Commissioner	_____	123	50	123	50	Petitions related to provisional applications	_____	126	180	126	180	Submission of Information Disclosure Stmt	_____	581	40	581	40	Recording each patent assignment per property (times number of properties)	_____	146	750	246	375	Filing a submission after final rejection (37 CFR § 1.129(a))	_____	149	750	249	375	For each additional invention to be examined (37 CFR § 1.129(b))	_____	179	750	279	375	Request for Continued Examination (RCE)	_____	169	900	169	900	Request for expedited examination of a design application	_____	Other fee (specify) _____				SUBTOTAL (3) (\$)		* Reduced by Basic Filing Fee Paid					
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\*\*or number previously paid, if greater; For Reissues, see above

SUBMITTED BY			Complete (if applicable)	
Name (Print/Type)	Albert P. Halluin	Registration No. (Attorney/Agent)	25,227	Telephone (650) 463-8109
Signature		Date	09-30-03	

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